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APPLICANTS

Thomas D. Petite, Douglasville, GA;
 Richard M. Huff, Conyers, GA;

** CONTINUING DATA *****

This application is a CIP of 09/271,517 03/18/1999 ABN

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 02/06/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY GA	SHEETS DRAWING 16	TOTAL CLAIMS 38	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

ADDRESS

40401

TITLE

SYSTEM AND METHOD FOR MONITORING AND CONTROLLING RESIDENTIAL DEVICES

FILING FEE RECEIVED 517	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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